



Inspection Report on

Ty Cariad Dementia Care Centre

**Ty Cariad Dementia Care Centre
North Wales Business Park
Cae Eithin
Abergele
LL22 8LJ**

Date Inspection Completed

29/02/2024

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About Ty Cariad Dementia Care Centre

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Fairways Care Ltd
Registered places	48
Language of the service	English
Previous Care Inspectorate Wales inspection	16 January 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Ty Cariad has been purpose built for people with dementia. There are four units to meet the needs of people in various stages of their dementia. Each unit has the same layout, which means it is easier for people to orientate to their new surroundings if they need to move between units.

There are outdoor areas which can be freely accessed by people, so they can relax outside in warmer weather. People also have a wide range of activities they can access, to suit different interests.

Care staff know people well and deliver kind and patient care. Management has robust systems in place to monitor the service and ensure good quality care is delivered.

Well-being

People can make choices about their day-to-day life. People freely access the garden and enjoy the outdoor space available to them. People have a choice of what they want to eat, there are two meal choices each day and alternatives can be requested. There are a variety of activities on offer for people. We saw people enjoying some arts and crafts for St David's day, they were relaxed and chatting to each other as they participated. Other people had made daffodils which were on display. The activities coordinator was organising an Easter raffle to raise funds for activities during our visit. We saw photos of people enjoying a variety of activities to suit different interests including rugby with a visiting rugby coach. One member of staff told us the activities are "*one after the other*".

People are treated with dignity and respect. Care staff provide kind and patient assistance, whilst ensuring they take time to explain what they are doing. Management are approachable and take time to talk to people about worries or concerns. Meals for people on blended or pureed diets are carefully prepared using food moulds. This gives their meal the same appearance as those served to those on a normal diet.

Care staff ensure people have access to the things which are important to them. People are supported to follow their religious beliefs by joining services online and having visits from religious organisations. Visitors are welcome to visit at any time, including mealtimes. The relatives we spoke to told us they are kept well informed about their relatives and described the communication as "*brilliant*".

The service is working towards an active offer of the Welsh language, there are Welsh words and phrases on display in the home, a mobile app which staff can access for translation and documents can be translated into Welsh if requested. Some care staff can communicate with people in basic Welsh. The area manager speaks fluent Welsh, and chats to Welsh speakers when they visit the service. We heard people engaging in Welsh with them during our inspection.

Care and Support

Care staff consider people's wishes and personal outcomes to inform their personal plan. People and their families are consulted for a detailed personal history which informs care staff what is important to each individual. The personal plans are clear about people's needs and easy to follow, which means care staff have clear instructions for the delivery of person-centred care. Personal plans and risk assessments are reviewed monthly, to ensure any changes are captured. Daily notes record that care is consistently delivered in line with personal plans. One staff member told us people are "*happy and flourishing*".

People have access to the health care they need as they are supported to attend regular health appointments. The information technology (IT) system assists with health monitoring, enabling care staff to identify when intervention is required, for example, if a person is losing weight. We saw evidence of careful monitoring following falls, with regular observations undertaken. The cause of each fall is carefully considered, and analysis undertaken helps identify patterns and trends. This means it can be identified when people require specialist support to manage falls risks.

Nursing staff manage storage and administration of medication safely, sometimes with the assistance of care staff, who receive specialist training for the role. Nursing staff act promptly and with care and consideration when people require assistance.

People live in a home which is clean and tidy, with safe practices followed to reduce the risk of infection. The service has a food hygiene rating of five, which is the highest rating which can be achieved. There are good stocks of cleaning materials and personal protective equipment with safe practices using these as required.

Environment

People live in a home which is designed specifically to meet their needs as purpose built for people living with dementia. There are ensuite toilet and shower facilities in every bedroom and grabrails throughout the building with access to specialist aids and equipment, supporting people to get around as independently as possible. The building is dementia friendly; it is light and spacious and there are contrasting coloured doors to aid people's orientation around the building. People's rooms have their name and a memory box on the door to assist them to recognise their room, and for others to know what is important to them. People can personalise their rooms to suit their individual tastes. The corridors contain items of interest such as beach scenes and photographs. People who walk with purpose have interest points to engage them, for example, for people who enjoy shopping there are scarves and hats to browse as they walk around the home.

Facilities are designed with the needs of people and their families in mind. There are gardens on the ground floor and large balconies on the first floor which are safe and secure and can be freely accessed by people and enjoyed by visitors. We saw people walking in and out and enjoying the fresh air and sense of freedom this allows them. Each unit has a dining and kitchen area, equipped with kettle allowing visitors to make drinks for themselves and their loved ones. The service has a sensory room which can be accessed by people in the later stages of dementia, this also serves as a guest room for families to stay in when visiting their loved ones.

Management ensures the building is safe and health and safety checks are completed regularly. We saw current gas and electrical safety certificates, and servicing of specialist equipment. Fire alarm systems and equipment is tested regularly and there is a fire drill completed every six months to ensure staff know what to do in the event of a fire. There is a system in place for reporting repairs, which are addressed in a timely manner.

Leadership and Management

Management has systems in place to ensure a good quality of care and support is delivered to people. Regular audits covering areas such as medication and infection control are completed, and these are effective at picking up issues so they can be addressed. Care staff participate in audits for the suitability and condition of specialist equipment, with managers overseeing these and replacing equipment as required. The area manager and responsible individual (RI) visit the service regularly, with the RI visiting weekly or fortnightly which exceeds the requirements of regulations. They focus on different service issues at each visit and take time to tour the building. Staff are positive about the management; one member of staff told us they are *“ready to do anything to make residents happy and comfortable the way they are.”*

Standards of care are reviewed and monitored thoroughly. The service receives many compliments and when complaints are received these are seriously considered, recorded and actions taken if required. The quality-of-care reports for the service are open and honest, reflecting a balanced approach of both positive and negative issues for the service. Where improvements are identified these are recorded with the required actions to be taken.

There are sufficient numbers of care staff to meet people’s needs. Rotas provide adequate levels of staff cover, with management completing an assessment of people’s level of needs every month. Safe recruitment practices are followed with references and disclosure and barring service checks being completed for all new staff. Care staff receive regular training and training records are reviewed and updated to make sure they accurately reflect training compliance.

The service provider ensures investment is made in the service, including IT and software which assists management and care staff in their role. The system used has reminders for tasks and reviews to ensure they do not become overdue. Staff say this system is easy to use and makes their job easier, helping them keep up to date with changes in people’s care and support needs, which can be challenging in a larger service.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
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N/A	No non-compliance of this type was identified at this inspection	N/A
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